

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Initial Patent Application of:  
Yu et al.

Docket No.: PF343P3C5

Application No.: 09/589,288

Confirmation No.: 1519

Filed: June 8, 2000

Art Unit: 1647

For: Methods of Inhibiting B Lymphocytes Using  
Antibodies to Neutrokin-alpha (As Amended)

Examiner: B. E. Bunner

**STATEMENT OF THE SUBSTANCE OF THE INTERVIEW AND AMENDMENT**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

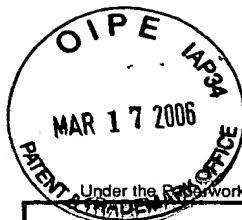
Applicants request that the following amendments and remarks be entered prior to further examination of the above-identified application. Applicants submit concurrently herewith:

- (a) Information Disclosure Statement with Form PTO/SB/08 and copies of references J22-J29, J71-J72 and J81-J99;
- (b) Copies of the PTO/SB/08 forms citing references C1-C10, D1-D2, E1-E3, F1-F3, G1-G4, H1, I1-I5 that were submitted to the Patent and Trademark Office on December 2, 2003, December 2, 2004, June 10, 2005, July 29, 2005, August 26, 2005, September 23, 2005 and January 20, 2006; and
- (c) Fee Transmittal Sheet.

Amendments to the Specification begin on page 2.

Amendments to the Claims begin on page 3.

Remarks begin on page 6.



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 360.00)

### Complete if Known

Application Number	09/589,288-Conf. #1519
Filing Date	June 8, 2000
First Named Inventor	Guo-Liang Yu
Examiner Name	B. E. Bunner
Art Unit	1647

Attorney Docket No. PF343P3C5

### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 08-3425 Deposit Account Name: Human Genome Sciences, Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

### FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

**Small Entity**

Fee (\$)

Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
89	- 167	x	=	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.				360.00	360.00

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
11	- 16	x	=
HP = highest number of independent claims paid for, if greater than 3.			

360.00 360.00

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 = /50 (round up to a whole number) x			=	<b>Fees Paid (\$)</b>

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

SUBMITTED BY		Registration No. (Attorney/Agent)	47,075	Telephone	(301) 354-3930
Signature	Michele Shannon				
Name (Print/Type)	Michele Shannon			Date	March 17, 2006